

UNITED	<b>STATES</b>	DISTRI	CT CO	URT
NORTHER	N DISTR	ICT OF	CALIFO	DRNIA

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.0	NORTHERN DISTRICT OF CALIFORNIA
9 10	ELIAS STAVRINIDES )
11	Plaintiff,   CASE NO.
12	vs. ) APPLICATION TO PROCEED
13	PACIFIC GAS AND ELECTRIC COMPANY  (Non-prisoner cases only)
14	Defendant. )
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16	I, ELIAS STAVRINIDES , declare, under penalty of perjury that I am the plaintiff
17	in the above entitled case and that the information I offer throughout this application is true and
18	correct. I offer this application in support of my request to proceed without being required to
19	prepay the full amount of fees, costs or give security. I state that because of my poverty I am
20	unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.
21	In support of this application, I provide the following information:
22	1. Are you presently employed? Yes No
23	If your answer is "yes," state both your gross and net salary or wages per month, and give the
24	name and address of your employer:
25	Gross: NA Net:
26	Employer: NA
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28	If the answer is "no," state the date of last employment and the amount of the gross and net salary

1	and wages	per month which you recei	ved.		
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3					
4	-				
5	2. Hav	ve you received, within the	past twelve (12) mor	nths, any n	noney from any of the
6	following sources:				
7	a.	Business, Profession o	r	Yes _	No
8		self employment?			
9	b.	Income from stocks, b	onds,	Yes	No <u> </u>
10		or royalties?			
11	c.	Rent payments?		Yes	No <u>~</u>
12	d.	Pensions, annuities, or		Yes	No <u> </u>
13		life insurance payment	s?		
14	e.	Federal or State welfar	e payments,	Yes	No 🗸
15		Social Security or other	r govern-		
16		ment source?			
ا 17	If the answ	er is "yes" to any of the abo	ove, describe each so	ource of mo	oney and state the amount
18	received fr	om each.			
19	HANDIM	AN/LANDSCAPING S	S1000 MONTH		
20		***************************************	· · · · · · · · · · · · · · · · · · ·		
21	3. Are	you married?		Yes 🗸	No
22	Spouse's Full Name: KRISTI STAVRINIDES				
23	Spouse's Place of Employment: SELF-HAIRDRESSER				
24		Ionthly Salary, Wages or In			
25	Gross \$ 320	00	Net \$_2800		
26	4. a.	List amount you contri		s support:\$	0.00
27	b.	List the persons other	han your spouse who	are depen	ndent upon you for support
28		and indicate how much	n you contribute towa	ard their su	apport. (NOTE: For minor
- 1					

1	children, list only their initials and ages. DO NOT INCLUDE THEIR NAMES.)
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4	5. Do you own or are you buying a home? Yes No
5	Estimated Market Value: \$ Amount of Mortgage: \$
6	6. Do you own an automobile? Yes <u>V</u> No
7	Make CHEV Year 2008 Model PICKUP
8	Is it financed? Yes No If so, Total due: \$ 2000
9	Monthly Payment: \$ 400
10	7. Do you have a bank account? Yes No <u>\(\bu\)</u> (Do <u>not</u> include account numbers.)
11	Name(s) and address(es) of bank: NA
12	
13	Present balance(s): \$ NA
14	Do you own any cash? Yes No Amount: \$ 300.00
15	Do you have any other assets? (If "yes," provide a description of each asset and its estimated
	Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.)  Yes No
16	
16 17	market value.)  Yes No   8. What are your monthly expenses?
16 17 18	market value.)  8. What are your monthly expenses? Rent: \$ \frac{0.00 \text{LIVE WITH PARENTS}}{0.00} \text{Utilities: } \frac{0.00}{0.00}
16 17 18 19	market value.)  Yes No   8. What are your monthly expenses?
115 116 117 118 119 220 221	market value.)  8. What are your monthly expenses? Rent: \$ \frac{0.00 \text{LIVE WITH PARENTS}}{0.00} \text{Utilities: } \frac{0.00}{0.00}
16 17 18 19 20	market value.)  8. What are your monthly expenses?  Rent: \$\frac{0.00 \text{ LIVE WITH PARENTS}}{0.00}\$ Utilities: \frac{0.00}{0.00}\$  Food: \$\frac{400.00}{0.00}\$ Clothing: \frac{200.00}{0.00}\$  Charge Accounts:  Name of Account Monthly Payment Total Owed on This Account
16 17 18 19 20 21	market value.)  8. What are your monthly expenses?  Rent: \$\frac{0.00 \text{ LIVE WITH PARENTS}}{0.00}\$ Utilities: \frac{0.00}{0.00}\$  Food: \$\frac{400.00}{0.00}\$ Clothing: \frac{200.00}{0.00}\$
116 117 118 119 220 221 222	market value.)  8. What are your monthly expenses?  Rent: \$\frac{0.00 \text{ LIVE WITH PARENTS}}{0.00}\$ Utilities: \frac{0.00}{0.00}\$  Food: \$\frac{400.00}{0.00}\$ Clothing: \frac{200.00}{0.00}\$  Charge Accounts:  Name of Account  Monthly Payment  Total Owed on This Account
116 117 118 119 220 221 222 233	market value.)  Yes No _  8. What are your monthly expenses?  Rent: \$\frac{0.00 \text{ LIVE WITH PARENTS}}{0.00}\$ Utilities: \frac{0.00}{200.00}\$  Food: \$\frac{400.00}{0}\$ Clothing: \frac{200.00}{0}\$  Charge Accounts:  Name of Account
116 117 118 119 220 221 222 233 224	market value.)         Yes No
116 117 118 119 220 221 222 223 224 225	market value.)       Yes No _ ✓

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2	10. Does the complaint which you are seeking to file raise claims that have been presented in
3	other lawsuits? Yes No
4	Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in
5	which they were filed.
6	NA
7	
8	I declare under the penalty of perjury that the foregoing is true and correct and understand that a
9	false statement herein may result in the dismissal of my claims.
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11	1-2-15 ESNI
12	DATE SIGNATURE OF APPLICANT
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